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Kenneth Shafer

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23416

APPLICATION NO.

10/725,075

12/01/2004

CONNOLLY BOVE LODGE & HUTZ, LLP P O BOX 2207 **WILMINGTON, DE 19899** 

12/28/2004 MWDLDGE2 00000064 032775 10725075

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(Depositor's name	Amy L. Hamm		
(Signature	az Hammi		
(Date	December 22, 2004		
CONFIRMATION NO.	INVENTOR ATTORNEY DOCKET NO.	FIRST NAMED IN	

04981-00483-US

2733

TITLE OF INVENTION: CIGARETTE WITH SMOKE CONSTITUENT ATTENUATOR

**FILING DATE** 

12/01/2003

APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370		\$300	\$1670	03/01/2005
EXAMINER		ART UN	IT	CLASS-SUBCLASS	]	
LOPEZ, CARLOS N 173		1731		131-361000	•	
CFR 1.363).  Change of correspond Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AND	or more recent) attached. Use	Correspondence ation form e of a Customer E PRINTED ON T	(1) the na or agents (2) the na registered 2 registered listed, no	nting on the patent front page, li times of up to 3 registered pater OR, alternatively, me of a single firm (having as a attorney or agent) and the name de patent attorneys or agents. If name will be printed.  T (print or type) the patent. If an assign for filling an assignment.	a member a 2 & Hut no no name is 3	olly Bove Lodge
(A) NAME OF ASSIGN	s Incorporated	(В	) RESIDENG	CE: (CITY and STATE OR CO ork, New York patent):	UNTRY)	
4a. The following fee(s) are Issue Fee Publication Fee (No s		4b ed)	Payment of A check	<del></del>	nclosed. 8 is attached.	
a. Applicant claims S	s (from status indicated above SMALL ENTITY status. See is requested to apply the Iss Publication Fee (if required) ords of the United States Pat	e) 37 CFR 1.27.	☐ b. Applic	cant is no longer claiming SMA ny) or to re-apply any previousl e other than the applicant; a reg	LL ENTITY status. See 37 C	CFR 1.27(g)(2).
Authorized Signature Typed or printed name	Richard V	U Bed eck		_ Date <u>Dec</u> _ Registration	ember 22, 2004 No. 22,580	

an application. Confidentiality is governed by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/17 (12-04)

Complete if Known   FEE TRANSMITTAL   FEE TRANSMITTAL   FOR FY 2005   First Named Inventor   Complete if Known   FOR FY 2005   First Named Inventor   Complete if Known   FOR FY 2005   First Named Inventor   Complete if Known   FEE TRANSMITTAL   Firing Date   December 1, 2003   First Named Inventor   Kenneth H. Shafer   Examiner Name   C. N. Lopez   Art Unit   1731	Under the Pap	perwork Reduction Act	of 1995, no person are	e required to	U.S. Pate	nt and Traden	roved for use throu nark Office; U.S. Di tion unless it displa	EPARTMENT OF	COMMERCE
Peep parswant to the Consolidated Appropriations Act, 2005 (R. 4818).   Application Number   To 10/7250/75-Conf. #2733					respond to a collection of information unless it displays a valid OMB control number  Complete if Known				
For FY 2005  Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT (\$) 1,700.00  Attorney Docket No. 04981-00483-US  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  X Deposit Account Deposit Account Number 03-2775 Deposit Account Number Connolly Bove Lodge & Hutz LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below See See See See See See See See See Se	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 10/725075-0			onf. #2733		
For FY 2005  Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT (\$) 1,700.00  Attorney Docket No. 04981-00483-US  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  X Deposit Account Deposit Account Number 03-2775 Deposit Account Number Connolly Bove Lodge & Hutz LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below See See See See See See See See See Se	FEE TRANSMITTAL			<del></del>			, 2003		
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METHOD OF PAYMENT (check all that apply)	<del></del>	101112	005		Examiner Name C. N. Lopez				
METHOD OF PAYMENT (check all that apply)	Applicant	claims small entity st	atus. See 37 CFR 1	.27	Art Unit		1731		
Check Credit Card Money Order None Other (please identify):    X   Deposit Account   Deposit Account Number   O3-2775   Deposit Account Name   Connolly Bove Lodge & Hutz LLP	TOTAL AMOUN	NT OF PAYMENT	(\$) 1,700	.00	Attorney Docke	et No.	04981-00483	-US	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below	METHOD OF	PAYMENT (chec	k all that apply)		<del>,</del>			·	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below	Check	Credit Card	Money Order	Nor	ne Other	(please iden	tify):		
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or any underpayment of  Charge any additional fee(s) or any underpayment of  Credit any overpayments  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity  Fee (S)	x Deposit Acc	count Deposit A	count Number: 03	3-2775	_ Deposit Account N	lame: Co	nnolly Bove L	odge & Hutz	LLP
X   Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17   X   Credit any overpayments   X	For the a	above-identified dep	posit account, the	Director is	hereby authoriz	zed to: (che	ck all that apply	)	
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FEE CALCULATION	X Ch	arge any additiona	fee(s) or any und	lerpaymen	t of x Credi	t any overpa	ayments		
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Plant	Utility	300	150						
Reissue 300 150 500 250 600 300  Provisional 200 100 0 0 0 0 0 0  2. EXCESS CLAIM FEES	Design	200	100	100	50	130	65		
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 2. EXCESS CLAIM FEES	Plant	200	100	300	150	160	80		
2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each independent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Sumall Entity  Fee (\$)  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other:  1501 Utility issue fee  1504 Publication fee for early, voluntary, or normal publication  Registration No. 23 580 Talebase (200) 550 04444  Registration No. 23 580 Talebase (200) 550 04444  Registration No. 23 580 Talebase (200) 650 04444	Reissue	300	150	500	250	600	300		
Fee (\$) Fee (\$)  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each claim over 3 or, for Reissues, each independent claim more than in the original patent  Each independent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  16  -20 =	Provisional	200	100	0	0	0	0		
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  200 100  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  -3 =	2. EXCESS CLA	IM FEES							
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3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  -100 =			-	-					
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Cround up to a whole number) x  =  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other: 1501 Utility issue fee  1,400.00  1504 Publication fee for early, voluntary, or normal publication  SUBMITTED BY  Registration No. 22 590 Telephone (202) CFR 0.141				Fee P	aid (\$)				
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  [Fee (\$)]  Fee Paid (\$)  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other:  1501 Utility issue fee  1,400.00  1504 Publication fee for early, voluntary, or normal publication  SUBMITTED BY  Registration No. 23 590 Telephone (202) CFR 0.141			× = .						
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	<del></del>	Ruhard	vy 150		(Attorney/Agent)	22,580	Telephone	(302) 658-	9141
Name (Print/Type) Richard M. Beck December 22, 2004	Name (Print/Type)	Richard M. Beck					Date	December 2:	2, 2004

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Dated: December 22, 2004

Signature: \_\_\_(

(Amy L. Hamm)